

SEPTIC TANK TO SANITARY SEWER CONVERSION GUIDELINES

IN THE CITY OF TWINSBURG (330) 963-6270

1. Complete the sewer conversion permit including areas concerned with the location of the building drain and basement fixtures. The contractor and the property owner must sign the application.
2. Two (2) copies of a site plan shall be submitted for review identifying the following:
 - a. location of the septic tank,
 - b. the direction and location of proposed tie-in into the public main from the building,
 - c. type, size, and diameter of pipe,
 - d. type and amount of backfill & bedding,
 - e. location of cleanouts.
3. Schedule an appointment with the Division of building to inspect the basement for compliance with the submitted application and site plan. *This will determine whether work in the interior of the building is required. If so, two (2) copies of a plan detailing the scope of work shall be submitted for review. If testing is determined necessary by the Building Commissioner, it will be at the cost of the applicant.*

At the Summit County Health District (330) 926-5600 or website www.schd.org

1. Obtain notification sewage treatment system abandonment permit under the site for Environmental Health, water quality.

At the City of Twinsburg (330) 963-6270 or website www.MyTwinsburg.com

1. Submit the sewer conversion (sewer tap-in) permit with the site plan and a copy of the abandonment permit from the county.
2. Obtain and complete a sewer conversion (sewer tap-in) permit application.
3. File the completed permit application at the Division of Building (10075 Ravenna Road) and include the applicable connection fee for an existing dwelling of at least one year old a fee of \$2,500.00 connection charge.
4. During installation call for the required inspections (for interior work call prior to covering or drywalling. For exterior work call prior to backfilling the lateral from the foundation to the main sewer at the street).

Permit Number _____

CITY OF TWINSBURG
DIVISION OF BUILDING
10075 Ravenna Road, Twinsburg, Ohio 44087
330-963-6270 FAX 330-963-6285

**APPLICATION FOR
SEWER CONVERSION PERMIT**

ADDRESS OF CONVERSION _____

PROPERTY OWNER _____ PHONE NO. _____

CONTRACTOR _____ PHONE NO. _____

SUBMITTER'S NAME _____

LOCATION OF BUILDING DRAIN WITH THE STRUCTURE:

Below basement floor
Supported by floor joist and penetrating foundation wall

IDENTIFY PLUMBING FIXTURE LOCATED IN THE BASEMENT:

Floor drain Water closet Shower Sink
Laundry tray Lavatory Bathtub
Clothes washing machine

LICENSE AGREEMENT

This application is hereby submitted for a license to convert a septic system or other private sanitary sewage system to a public sanitary as described in this application and the accompanying drawings that are a part of the application. The acceptance of this license herein applied for shall constitute an agreement on the part of the undersigned to abide by all conditions herein contained and to comply with all ordinances of the City, laws and regulations of the State of Ohio and Summit County; and any special requirements rules, regulations and standards of the Division of Building.

Property owner _____ Date _____
Signature

Property owner _____
Print Name

Contractor _____ Date _____
Signature

Contractor _____
Print Name

SAMPLE SKETCH

PROPERTY OWNER:

CONTRACTOR:

ADDRESS:

ADDRESS:

PHONE NO.:

PHONE NO.:

A STATEMENT INDICATING THAT THE SANITARY AND STORM SEWER SYSTEMS ARE OR SHALL BE SEPARATED SHALL BE INCLUDED ON THE SKETCH.

